| P/ | TENT | APPLICA Eff | ATION FI | EE DETERN ecember 8, 2 | ////////////////////////////////////// | TION RE | ECO | RD | | | , | | · | |
|--------------------------|---------------------------------------|-------------------------|----------------------|---------------------------------------|--|------------------|----------|------------------|--------------|-------------|---------------|--------------|---------------|--------------------|
| CLAIMS AS FILED - PART I | | | | | | | | | LLE | | | <u>78</u> | 68 | |
| TOTAL | CLAIMS | C-06-94-31-35-31-7-43-4 | (Co | olumn 1) | (Co | olumn 2) | | TYP | E | VIII 1 | r : | ÓR | OTH SMAL | ER THAN L ENTIT |
| FOR | · | | NUN | MBER FILED | A.I. I. | MBER EXTR | | | 910 | | - | | 二 | - |
| TOTAL C | HARGEA | BLE CLAIM | | minus 20= | * | 47 | <u> </u> | . | C FEE | 150. | .00 | OR | BASIC FE | E 300.0 |
| INDEPEN | DENT CL | AIMS | 5 | minus 3 = | * . | 7/ | | X\$ | 25= | | | OR | X\$50= | |
| MULTIPLE | DEPEN | DENT CLAIN | A PRESEN | Т. | | | - | X10 | 00= | | | OR | X200= | |
| * If the dif | ference | in column 1 | is less tha | ess than zero, enter "0" in column 2 | | | | +18 | 0= | • | | OR | +360≐ | |
| | | | | DED - PART | | column 2 | | TÓT | AL | | \exists | DR | TOTAL | |
| | · · · · · · · · · · · · · · · · · · · | (Column 1 |) | (Column | | (Column | 3) | SMA | LL EN | JTIT√ | | ir : | OTHER | THAN |
| E 11/02 | 2/06 | REMAINING AFTER | 1 | HIGHES NUMBE PREVIOU | A | PRESENT | 7 | | 7 | ADDI- | 7 | <u> </u> | SWALL | ENTITY ADDI- |
| Total Independent | · | AMENDMEN | Minus | PAID FO | | EXTRA | | RAT | 1 ' | ONA FEE | | | RATE | TIONAL FEE |
| Indeper | | SI_ | Minus | ** 63 *** 8 | <u> </u> | = . | 4 | X\$ 25 | j= | \perp | 0 | R > | (\$50= | |
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| | | Column 1) | | (0.1 | | | | TOTA DDIT. FE | E | | OF | ADD | TOTAL | |
| | | CLAIMS REMAINING | | (Column: HIGHEST NUMBER | | (Column 3) |] r | | · AF | DI- | 1 | | | |
| - | | AFTER MENDMENT | | PREVIOUSL PAID FOR | Y I | PRESENT EXTRA | | RATE | TIO | NAL | | R. | ATE T | ADDI- TIONAL |
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| | | ٠. | • | | | | <u></u> | TOTAL | - | | OR OR., | +36 | OTAL | |
| | (C | Olumn 1) Claims | | (Column 2) | (C | Column 3) | ADI | DIT. FEE | <u> </u> | l` | Ο <u>η.</u> , | ADDIT | FEEL | |
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| Total | . AMI | ENDMENT | Minus | PAID FOR | - - | EXTRA | | RATE | TION. FEE | | | RAT | | ONAL EEE |
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